

criminal, whose sentence has expired, in the ordinary hospital for the insane. While this compilation cannot be said to possess much originality, it has some value as a work of reference, but the author's knowledge of psychiatry is so limited that his preface is calculated to injure the very class whom he desires to benefit.

J. G. K.

Opera Minora. By E. C. SEGUIN, M.D. Edited by R. W. AMIDON, M.D. New York : G. P. Putnam's Sons, 1884.

Dr. Seguin has collected in this volume his contributions to periodical literature during the past eighteen years, thus rendering them readily accessible to the profession. The opening paper is on the thermometer in medicine, and is reprinted from the *Chicago Medical Journal*, May, 1866, and at this date does not call for comment. The same is true of the next two papers, reprinted from the *New York Medical Journal*, August and December, 1867, and the fourth paper written in 1870. The fifth paper on the aphasia question, published in 1868, is of decided interest, albeit, forty-six of the cases cited were, as Dr. Seguin admits, very imperfectly noted. A case of trichinosis, reported in 1868, is at this date of historic interest only, and the same remark applies to the next case-report on ocular œdema. The case of probable lesion of the lateral half of the spinal cord, resulting in left hemianæsthesia and right hemiplegia, was not supplemented by an autopsy, and a cerebral element cannot therefore be excluded.

The history of the case of "mania" is defective, and whatever the psychosis might have been, it certainly was not mania. Judging from the mixed, silly grandiose, and persecutory delusions, the apoplectiform attacks, and the results of Dr. Seguin's careful autopsy, the case was one of impure parietic dementia.

Two carefully reported microscopical examinations follow, but do not possess features calling for criticism ; one is an examination of a double central canal in the spinal cord of a parietic dement. The next case, one of parietic dementia, is very carefully described, but does not present any thing novel except the statement that Dr. T. R. Pooley found atrophy of both optic disks, secondary to optic neuritis, during life, and Dr. Delafield found both optic nerves, on microscopic examination, absolutely normal ; a curious contradiction.

The lecture on infantile spinal paralysis is a good résumé of the knowledge of the subject up to the date at which it was written. Excision of the cords which go to form the brachial plexus in a case of traumatic brachial neuralgia is the subject of the next paper. It must be remembered that this operation was planned by Dr. Seguin and executed by Dr. Sands before the present furor for nerve-stretching and excision existed.

The paper on the inhibitory arrest of sneezing is interesting ; but the procedure, forcibly rubbing the skin below and on either side of the nose, is not followed by invariable success, and does not differ in its effect from the inhibition produced by suddenly

changing the course of ideas of the person who is about to sneeze. The papers on tetanoid paraplegia are among the most valuable in the book.

The lectures on the general therapeutics of the nervous system deserve perusal. Dr. Seguin evolves from his internal consciousness the rather peculiar theory that "food is a depressant because it remedies the morbid irritation produced in the brain in cases of exhaustion whether from hemorrhage or over-work." If such be the powers of a depressant then food is a depressant, but it appears from the next paragraph that alcohol does the same thing, and Dr. Seguin, in that paragraph, calls alcohol a stimulant. Anstie has shown that food and alcohol are both, in the true sense of the term, stimulants, and Dr. Seguin is evidently biased by the popular meaning of the term stimulant. The lecture on the physiology of the nervous system does not call for comment. The paper on hysterical symptoms in organic disease, is a contribution of great value in the sphere of differential diagnosis. The next paper is a case-report containing nothing novel.

The next six papers have appeared as a whole or in abstract in the JOURNAL OF NERVOUS AND MENTAL DISEASE, and are sufficiently familiar to the readers of this journal.

The lecture on syphilitic cerebral lesions is biased by Dr. Seguin's belief in Hübner's dicta regarding luetic arteritis; dicta which have since been proven not well based. The lectures on localization of cerebral and spinal lesions are an excellent résumé of the knowledge of the subject up to the date at which they were written. In the lecture on locomotor ataxia Dr. Seguin points out very carefully the relationship between this disease and paretic dementia,—a relationship much ignored by those who discuss the differential diagnosis of these two neuroses.

The next four papers have appeared in abstract in this JOURNAL. The untoward renal effects of potassium iodide are discussed in the next paper. Dr. Seguin makes no reference to the fact that Rilliet, Rodet, Simon, Regnard, and others had previously pointed out the same effects of potassium iodide.

The next paper reports two cases described as *folie à deux*, but these are simply, as was pointed out in the JOURNAL OF NERVOUS AND MENTAL DISEASE, October, 1881, cases of melancholia arising in sisters. There was no inter-communication of insane ideas. They are cases of *folie simultanée*, but are certainly not cases of *folie à deux*. Dr. Seguin has been misled by Dr. Lasègue, who puts such cases under *folie à deux—communicated* insanity, with which, psychologically, they have nothing in common. In the one there is an inter-communication of insane ideas; in the other there is none.

The next five papers do not call for comment. The paper on subacute transverse myelitis and optic neuritis has already appeared in the JOURNAL OF NERVOUS AND MENTAL DISEASE. A case of mysophobia is then reported. Occipital headache and uræmia are then discussed in their inter-relations. The next

paper discusses a case of cerebral abscess. The paper on early diagnosis of the organic neuroses makes some very positive statements about the early appearance of ataxia in tabes dorsalis which do not agree with the reviewer's experience.

The paper on hyoscyamia as an hypnotic and depresso-motor is not of much value, as the use of hyoscyamine in the psychoses is not clearly indicated, and nothing is said of its contra-indications and untoward effects, which are exceedingly frequent. The statement is made that in delusions of suspicion it has produced a positive cure. As was said in the *JOURNAL OF NERVOUS AND MENTAL DISEASE*, October, 1881, p. 790: "Which type of delusions of persecution is meant? The one found in paranoia resulting from incarceration in an hospital for the insane, or some similar logical reason?; the one found in melancholia?; or the one found in parietic dementia? The delusion in paranoia is a somewhat complicated process of thought, and can any one claim that this can be swept away by a single drug? The idea is absurd; as well might one have attempted to remove the 'terror' of the French during the first Revolution by doses of hyoscyamine. Melancholia is a condition in which all mydriatics are strongly contra-indicated, and on it hyoscyamine could have but a depressing effect. The delusions in parietic dementia shift and vary so much that it would be difficult—nay, almost impossible—to prove that their disappearance was due to any one drug." As was very well said by Dr. D. R. Brower (*American Journal of Neurology and Psychiatry*, 1883), hyoscyamine is a therapeutic fashion just now.

The next paper calls attention to the fact that tabetic patients are peculiarly insusceptible to aconitia. The next four papers have appeared as a whole or in abstract in the *JOURNAL OF NERVOUS AND MENTAL DISEASE*. The paper on the early recognition of epilepsy shows that even well-informed practitioners fail to recognize epilepsy. Dr. Seguin points out that these errors are due to a physiological misconception of the duration of the tendency to convulsibility and an etiological misconception resulting from the over-estimation of the exciting powers of local, internal, and peripheral causes. Dr. Seguin has certainly rendered a great service to the profession by this careful paper. Like the great majority of alienists and neurologists, Dr. Seguin is impressed with the incurability and psychic dangers of *petit mal*. The lectures on methods of diagnosis in diseases of the nervous system contain a great deal of information in a very concise form. The paper on potassium iodide in the non-luetic neuroses has already appeared in this *JOURNAL* in abstract. The paper on efficient dosage contains hints of great value. The next five papers on choked disk, injury to motor area of the brain, vertebral cancer and paraplegia, arsenical paralysis, and bromine ulcers are familiar to the readers of the *JOURNAL*. The two papers on aneurism and neuralgia do not call for comment.

Two cases of glycosuria (one real, one simulated) are then re-



ported. The first is stated to have consulted Dr. Seguin for "moderate dementia"; she was fifty-one years of age, and six years previous had an attack of "quite acute melancholia." "No positive delusions or hallucinations" existed, but the patient "fancied her arms were paralyzed, and wanted them cut off." Sugar was unexpectedly found in the urine, and disappeared the next morning. The second case was an hysteric, who put cane-sugar into her urine. The first case was probably one of true hysterical glycosuria, and is not unique.

The note on cerebral topography contains some hints of value. Dr. Seguin next discusses "mild" melancholia. The meaning attached to the term "mild" is not clear. Dr. Seguin certainly does not mean melancholia raisonnante, for the first case has hallucinations, and may be either a case of periodic melancholia (which has not, as Dr. Seguin seems to believe, a tendency to dementia) or epilepsy. It is an almost exact copy, except that the melancholia is not so well marked, of an epileptic case reported by Dickson ("Medicine in Relation to Mind," p. 134), in which an "alienist" diagnosticated melancholia with lucid intervals. Dr. Seguin says that the bromide treatment had no effect in his case, and uses this as an argument against its epileptic nature, but, as he has previously admitted, "*petit mal* is very rebellious to treatment by bromides." The boy did "many disagreeable things—whistling, crowing, stamping, kicking"; his case had a traumatic origin; he lost consciousness once, and "his father, an unreliable witness, thought he twitched." In one attack he was dull, drowsy, and restless, spoke slowly, and many parts of the body were the seat of *twitching*. He was placed under *ergot*, and during this time had *fewer* attacks. It is difficult to make any other diagnosis in the case than epileptic insanity; it was certainly not melancholia of the periodic or any other type. The doctrine taught in this paper is a dangerous one; the melancholiacs are the most suicidal of all cases, and while they may be treated at home, it is a measure attended with great risk. Dr. Seguin's remarks on the disadvantages of potassium bromide in melancholia are too mildly put. The last paper is a well-written defence of specialties in medicine.

In collecting his scattered essays in this manner, Dr. Seguin has been of great service to the profession. The book is markedly unequal; its weakest part are the contributions to psychiatry and the anatomic-pathology of the psychoses. The therapeutical contributions are of great value. The neurologist and particularly the general practitioner will find himself well rewarded by the purchase and perusal of this work. The editor's work is not in any way remarkable for the ability shown therein, the arrangement of the papers not being at all systematic. The typography of the book is excellent, but the uncut pages are a disagreeable anglo-maniacal imitation. From the standpoint of a bibliophile uncut pages may be desirable, but the present work is intended for perusal, and not for museum purposes alone.

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